

10/27/99

3C714 U.S. PTO

PTO/SB/05 (2/98) (modified)  
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 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

# **NEW UTILITY PATENT APPLICATION TRANSMITTAL**

(only for new nonprovisional applications under  
 37 CFR 1.53(b))

Attorney Docket Number 3894

First Named Inventor Andrew D. Holmes

Total Pages in this Submission 58

Express Mail Label No. EL263547031US

## **APPLICATION ELEMENTS**

1. ☒ Fee Transmittal Form  
☐ Check Enclosed
2. ☒ Specification  
*(preferred arrangement set forth below)*
  - Descriptive Title of the Invention
  - Cross Reference(s) to Related Case(s)
  - Statement Regarding Fed sponsored R & D
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawing(s)
  - Detailed Description
  - Claim or Claims
  - Abstract of the Disclosure
3. ☒ Drawing(s) ( when necessary per 35 USC 113)
4. Oath or Declaration
  - a. ☒ New Declaration  
☐ Executed
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with Box 17 completed)*
    - i. ☐ DELETION OF INVENTOR(S)  
 Signed statement attached deleting inventor(s)  
 named in the prior application, see 37 CFR  
 1.63(d)(2) and 1.33(b).
5. ☐ Incorporation by Reference (useable if Box 4b is checked). The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

## **ACCOMPANYING APPLICATION PARTS**

6. ☐ Assignment & Assignment Recordation Cover Sheet
7. ☐ Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*
8. ☐ Information Disclosure Statement & PTO-1449  
☐ Copies of IDS Citation(s)
9. ☐ Preliminary Amendment
10. Small Entity Statement  
☐ New Statement enclosed  
☐ Statement filed in prior application. Status still proper and desired
11. ☒ Return Postcard
12. ☐
13. ☐
14. ☐
15. ☐
16. ☐

### **ADDRESS TO:**

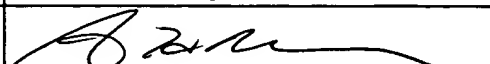
Assistant Commissioner for Patents  
 Box Patent Application  
 Washington, D.C. 20231

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_/\_\_\_

Prior application information: Examiner: \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

### **18. CORRESPONDENCE ADDRESS**

|                   |   |           |                |                                   |                  |
|-------------------|---|-----------|----------------|-----------------------------------|------------------|
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| Name (Print/Type) | Amir H. Raubvogel   |           |                | Registration No. (Attorney/Agent) | 37,070           |
| Signature         |  |           |                | Date                              | October 27, 1999 |

|  |  |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
|--|--|---|--------------------|---------------|-------------|------------------|----------------------|------------------|----------------|---------------|---------------|---------------|------------------------|------|
| 0002/PTO(modified)<br>Rev. 10/95             | U.S. Department of Commerce<br>Patent and Trademark Office | <b>Complete if Known</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>not yet known</td></tr> <tr><td>Filing Date</td><td>October 27, 1999</td></tr> <tr><td>First Named Inventor</td><td>Andrew D. Holmes</td></tr> <tr><td>Group Art Unit</td><td>not yet known</td></tr> <tr><td>Examiner Name</td><td>not yet known</td></tr> <tr><td>Attorney Docket Number</td><td>3894</td></tr> </table> | Application Number | not yet known | Filing Date | October 27, 1999 | First Named Inventor | Andrew D. Holmes | Group Art Unit | not yet known | Examiner Name | not yet known | Attorney Docket Number | 3894 |
| Application Number                           | not yet known  |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
| Filing Date                                  | October 27, 1999   |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
| First Named Inventor                         | Andrew D. Holmes   |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
| Group Art Unit                               | not yet known  |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
| Examiner Name                                | not yet known  |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
| Attorney Docket Number                       | 3894   |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
| <b>FEE TRANSMITTAL</b>                       |  |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
| <b>TOTAL AMOUNT DUE</b>                      |  |   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |
| Subtotal (1) + Subtotal (2) + Subtotal (3) = |  | <b>(\$2,284.00)</b>   |                    |               |             |                  |                      |                  |                |               |               |               |                        |      |

| METHOD OF PAYMENT   | FEE CALCULATION (continued)   |  |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
|---|---|--|------------------------------|-----------------|-----------|-----------|----------------|-------------------------------------|-----------|-----------|------------------------|--|-----------|-------------|----------------|--|--------------|-----------|--------------------|--|---------------------|-----------|-------------------|---|--|------------------------------|------------------------------|--|----------|-------------|--|---|----------|-----------------------------------|-----------|--|--------------------------|-----------|-----------|---|----------|-------------|---|--|-----|-------------|-----------|--------------------------------|-----|-----------|-----------|------------------|-----|-----------|-----------|-------------------------------|-----|----------|----------|---|-----|-----------|-----------|--|-----|----------|----------|--|-----|-----------|-----------|---|-----|-----------|-----------|--|-----|----------------------|--|--|-----|----------------------|--|--|-----|---------------------|--|-----------------|--|
| <b>1. Payment not enclosed</b>  | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Small Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Due</th> </tr> </thead> <tbody> <tr><td>105/\$130</td><td>205/\$65</td><td>Surcharge - late filing fee or oath</td><td style="text-align: right;">[ ]</td></tr> <tr><td>127/\$50</td><td>227/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td style="text-align: right;">[ ]</td></tr> <tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td style="text-align: right;">[ ]</td></tr> <tr><td>115/\$110</td><td>215/\$55</td><td>Extension for response within first month<sup>†</sup></td><td style="text-align: right;">[ ]</td></tr> <tr><td>116/\$380</td><td>216/\$190</td><td>Extension for response within second month<sup>†</sup></td><td style="text-align: right;">[ ]</td></tr> <tr><td>117/\$870</td><td>217/\$435</td><td>Extension for response within third month<sup>†</sup></td><td style="text-align: right;">[ ]</td></tr> <tr><td>118/\$1,360</td><td>218/\$680</td><td>Extension for response within fourth month<sup>†</sup></td><td style="text-align: right;">[ ]</td></tr> <tr><td>128/\$1,850</td><td>228/\$925</td><td>Extension for response within fifth month<sup>†</sup></td><td style="text-align: right;">[ ]</td></tr> <tr><td>119/\$300</td><td>219/\$150</td><td>Notice of Appeal</td><td style="text-align: right;">[ ]</td></tr> <tr><td>141/\$1,210</td><td>241/\$605</td><td>Petition to revive unintentionally abandoned application</td><td style="text-align: right;">[ ]</td></tr> <tr><td>142/\$1,210</td><td>242/\$605</td><td>Utility Issue Fee (Or Reissue)</td><td style="text-align: right;">[ ]</td></tr> <tr><td>143/\$430</td><td>243/\$215</td><td>Design Issue Fee</td><td style="text-align: right;">[ ]</td></tr> <tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td style="text-align: right;">[ ]</td></tr> <tr><td>123/\$50</td><td>123/\$50</td><td>Petitions related to provisional applications</td><td style="text-align: right;">[ ]</td></tr> <tr><td>126/\$240</td><td>126/\$240</td><td>Submission of Information Disclosure Statement</td><td style="text-align: right;">[ ]</td></tr> <tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td style="text-align: right;">[ ]</td></tr> <tr><td>146/\$760</td><td>246/\$380</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td style="text-align: right;">[ ]</td></tr> <tr><td>149/\$760</td><td>249/\$380</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td style="text-align: right;">[ ]</td></tr> <tr><td colspan="3">Other fee (specify):</td><td style="text-align: right;">[ ]</td></tr> <tr><td colspan="3">Other fee (specify):</td><td style="text-align: right;">[ ]</td></tr> <tr> <td colspan="2" style="text-align: right;"><b>SUBTOTAL (3)</b></td> <td colspan="2" style="text-align: right;"><b>(\$0.00)</b></td> </tr> </tbody> </table> | Large Entity<br>Fee Code/Fee   | Small Entity<br>Fee Code/Fee | Fee Description | Fee Due   | 105/\$130 | 205/\$65       | Surcharge - late filing fee or oath | [ ]       | 127/\$50  | 227/\$25               | Surcharge-late provisional filing fee or cover sheet | [ ]       | 147/\$2,520 | 147/\$2,520    | For filing a request for reexamination | [ ]          | 115/\$110 | 215/\$55           | Extension for response within first month <sup>†</sup> | [ ]                 | 116/\$380 | 216/\$190         | Extension for response within second month <sup>†</sup> | [ ]  | 117/\$870                    | 217/\$435                    | Extension for response within third month <sup>†</sup> | [ ]      | 118/\$1,360 | 218/\$680  | Extension for response within fourth month <sup>†</sup> | [ ]      | 128/\$1,850                       | 228/\$925 | Extension for response within fifth month <sup>†</sup> | [ ]                      | 119/\$300 | 219/\$150 | Notice of Appeal                                | [ ]      | 141/\$1,210 | 241/\$605   | Petition to revive unintentionally abandoned application | [ ] | 142/\$1,210 | 242/\$605 | Utility Issue Fee (Or Reissue) | [ ] | 143/\$430 | 243/\$215 | Design Issue Fee | [ ] | 122/\$130 | 122/\$130 | Petitions to the Commissioner | [ ] | 123/\$50 | 123/\$50 | Petitions related to provisional applications | [ ] | 126/\$240 | 126/\$240 | Submission of Information Disclosure Statement | [ ] | 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | [ ] | 146/\$760 | 246/\$380 | Filing a submission after final rejection (37 CFR 1.129(a)) | [ ] | 149/\$760 | 249/\$380 | For each additional invention to be examined (37 CFR 1.129(b)) | [ ] | Other fee (specify): |  |  | [ ] | Other fee (specify): |  |  | [ ] | <b>SUBTOTAL (3)</b> |  | <b>(\$0.00)</b> |  |
| Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee  | Fee Description  | Fee Due                      |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 105/\$130   | 205/\$65  | Surcharge - late filing fee or oath  | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 127/\$50  | 227/\$25  | Surcharge-late provisional filing fee or cover sheet                       | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 147/\$2,520   | 147/\$2,520   | For filing a request for reexamination                                     | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 115/\$110   | 215/\$55  | Extension for response within first month <sup>†</sup>                     | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 116/\$380   | 216/\$190   | Extension for response within second month <sup>†</sup>                    | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 117/\$870   | 217/\$435   | Extension for response within third month <sup>†</sup>                     | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 118/\$1,360   | 218/\$680   | Extension for response within fourth month <sup>†</sup>                    | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 128/\$1,850   | 228/\$925   | Extension for response within fifth month <sup>†</sup>                     | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 119/\$300   | 219/\$150   | Notice of Appeal   | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 141/\$1,210   | 241/\$605   | Petition to revive unintentionally abandoned application                   | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 142/\$1,210   | 242/\$605   | Utility Issue Fee (Or Reissue)   | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 143/\$430   | 243/\$215   | Design Issue Fee   | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 122/\$130   | 122/\$130   | Petitions to the Commissioner  | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 123/\$50  | 123/\$50  | Petitions related to provisional applications                              | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 126/\$240   | 126/\$240   | Submission of Information Disclosure Statement                             | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 581/\$40  | 581/\$40  | Recording each patent assignment per property (times number of properties) | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 146/\$760   | 246/\$380   | Filing a submission after final rejection (37 CFR 1.129(a))                | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 149/\$760   | 249/\$380   | For each additional invention to be examined (37 CFR 1.129(b))             | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| Other fee (specify):  |   |  | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| Other fee (specify):  |   |  | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| <b>SUBTOTAL (3)</b>   |   | <b>(\$0.00)</b>  |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| <b>FEE CALCULATION</b> (fees effective 11/12/98)<br><b>1. FILING FEE</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Small Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Due</th> </tr> </thead> <tbody> <tr><td>101/\$760</td><td>201/\$380</td><td>Utility Filing</td><td style="text-align: right;">760</td></tr> <tr><td>106/\$310</td><td>206/\$155</td><td>Design Filing</td><td style="text-align: right;">[ ]</td></tr> <tr><td>108/\$760</td><td>208/\$380</td><td>Reissue Filing</td><td style="text-align: right;">[ ]</td></tr> <tr><td>114/\$150</td><td>214/\$75</td><td>Provisional Filing</td><td style="text-align: right;">[ ]</td></tr> <tr> <td colspan="2" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td colspan="2" style="text-align: right;"><b>(\$760.00)</b></td> </tr> </tbody> </table> | Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee   | Fee Description              | Fee Due         | 101/\$760 | 201/\$380 | Utility Filing | 760                                 | 106/\$310 | 206/\$155 | Design Filing          | [ ]  | 108/\$760 | 208/\$380   | Reissue Filing | [ ]                                    | 114/\$150    | 214/\$75  | Provisional Filing | [ ]  | <b>SUBTOTAL (1)</b> |           | <b>(\$760.00)</b> |   | <b>2. CLAIMS</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Small Entity<br/>Fee Code/Fee</th> <th style="text-align: left;">Fee Description</th> </tr> </thead> <tbody> <tr><td>103/\$18</td><td>203/\$9</td><td>Claims in excess of 20</td></tr> <tr><td>102/\$78</td><td>202/\$39</td><td>Independent claims in excess of 3</td></tr> <tr><td>104/\$260</td><td>204/\$130</td><td>Multiple dependent claim</td></tr> <tr><td>109/\$78</td><td>209/\$39</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110/\$18</td><td>210/\$9</td><td>Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> | Large Entity<br>Fee Code/Fee | Small Entity<br>Fee Code/Fee | Fee Description  | 103/\$18 | 203/\$9     | Claims in excess of 20                             | 102/\$78  | 202/\$39 | Independent claims in excess of 3 | 104/\$260 | 204/\$130  | Multiple dependent claim | 109/\$78  | 209/\$39  | Reissue independent claims over original patent | 110/\$18 | 210/\$9     | Reissue claims in excess of 20 and over original patent |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee  | Fee Description  | Fee Due                      |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 101/\$760   | 201/\$380   | Utility Filing   | 760                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 106/\$310   | 206/\$155   | Design Filing  | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 108/\$760   | 208/\$380   | Reissue Filing   | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 114/\$150   | 214/\$75  | Provisional Filing   | [ ]                          |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| <b>SUBTOTAL (1)</b>   |   | <b>(\$760.00)</b>  |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee  | Fee Description  |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 103/\$18  | 203/\$9   | Claims in excess of 20   |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 102/\$78  | 202/\$39  | Independent claims in excess of 3  |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 104/\$260   | 204/\$130   | Multiple dependent claim   |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 109/\$78  | 209/\$39  | Reissue independent claims over original patent                            |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| 110/\$18  | 210/\$9   | Reissue claims in excess of 20 and over original patent                    |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">(Col. 1)</th> <th colspan="2">(Col. 2)</th> <th colspan="2">(Col. 3)</th> <th rowspan="2">Fee</th> <th rowspan="2">Fee Due</th> </tr> <tr> <th>For</th> <th>No. of Existing Claims</th> <th>Highest No. Previously Paid For</th> <th>Extra**</th> <th></th> </tr> </thead> <tbody> <tr> <td>TOTAL</td> <td>57</td> <td>minus* 20 or</td> <td>= 37</td> <td>x 18</td> <td>= 666</td> <td></td> <td></td> </tr> <tr> <td>INDEP</td> <td>14</td> <td>minus* 3 or</td> <td>= 11</td> <td>x 78</td> <td>= 858</td> <td></td> <td></td> </tr> <tr> <td colspan="8">           [ ] First presentation of multiple dependent claim         </td> </tr> </tbody> </table>   |   | (Col. 1)   |                              | (Col. 2)        |           | (Col. 3)  |                | Fee                                 | Fee Due   | For       | No. of Existing Claims | Highest No. Previously Paid For                      | Extra**   |             | TOTAL          | 57                                     | minus* 20 or | = 37      | x 18               | = 666  |                     |           | INDEP             | 14  | minus* 3 or  | = 11                         | x 78                         | = 858  |          |             | [ ] First presentation of multiple dependent claim |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| (Col. 1)  |   | (Col. 2)   |                              | (Col. 3)        |           | Fee       | Fee Due        |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| For   | No. of Existing Claims  | Highest No. Previously Paid For  | Extra**                      |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| TOTAL   | 57  | minus* 20 or   | = 37                         | x 18            | = 666     |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| INDEP   | 14  | minus* 3 or  | = 11                         | x 78            | = 858     |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| [ ] First presentation of multiple dependent claim  |   |  |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |
| <b>SUBTOTAL (2)</b>   |   | <b>(\$1524)</b>  |                              |                 |           |           |                |                                     |           |           |                        |  |           |             |                |  |              |           |                    |  |                     |           |                   |   |  |                              |                              |  |          |             |  |   |          |                                   |           |  |                          |           |           |   |          |             |   |  |     |             |           |                                |     |           |           |                  |     |           |           |                               |     |          |          |   |     |           |           |  |     |          |          |  |     |           |           |   |     |           |           |  |     |                      |  |  |     |                      |  |  |     |                     |  |                 |  |

|                       |                   |                                 |                  |
|-----------------------|-------------------|---------------------------------|------------------|
| <b>SUBMITTED BY</b>   |                   | <b>Complete (if applicable)</b> |                  |
| Typed or Printed Name | Amir H. Raubvogel | Reg. Number                     | 37,070           |
| Signature             |                   | Date                            | October 27, 1999 |

<sup>†</sup> Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby